PLUM CITY CARE CENTER

301 CHERRY STREET	

PLUM CITY 54761	Phone: (715) 647-2401		Ownership:	Corporation
Operated from 1/1 To 12	/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction wi	th Hospital?	No	Operate in Conjunction with CBRF?	Yes
Number of Beds Set Up and	Staffed (12/31/03):	50	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capaci	ty (12/31/03):	50	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12	/31/03:	47	Average Daily Census:	47

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	12/31/03)	Length of Stay (12/31/03)	용
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis					17.0 51.1
Supp. Home Care-Household Services Day Services	No		0.0	Under 65 65 - 74		More Than 4 Years	19.1
Respite Care	Yes	Mental Illness (Other)	6.4	75 - 84	25.5	İ	87.2
Adult Day Care Adult Day Health Care		Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic		85 - 94 95 & Over		********************************* Full-Time Equivalent	
Congregate Meals Home Delivered Meals		Cancer Fractures		 		Nursing Staff per 100 Res	idents
Other Meals		Cardiovascular		65 & Over			
Transportation Referral Service		Cerebrovascular Diabetes		 Gender		RNs LPNs	6.5 15.0
Other Services Provide Day Programming for	Yes	Respiratory Other Medical Conditions		 Male		Nursing Assistants, Aides, & Orderlies	38.5
Mentally Ill	No			Female	74.5	İ	
Provide Day Programming for Developmentally Disabled	No		100.0	 	100.0	I and the second	

Method of Reimbursement

		Medicare			edicaid itle 19			Other		:	Private Pay	:		amily Care			anaged Care			
Level of Care	No.	90	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	%	Per Diem (\$)	No.	00	Per Diem (\$)	No.	96	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	1	100.0	389	25	80.6	109	0	0.0	0	12	80.0	127	0	0.0	0	0	0.0	0	38	80.9
Intermediate				6	19.4	91	0	0.0	0	3	20.0	117	0	0.0	0	0	0.0	0	9	19.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	1	100.0		31	100.0		0	0.0		15	100.0		0	0.0		0	0.0		47	100.0

PLUM CITY CARE CENTER

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	cions, Services, an	d Activities as of 12/	31/03
Deaths During Reporting Period							
	- 1				% Needing		Total
Percent Admissions from:	- 1	Activities of	용	As	ssistance of	% Totally	Number of
Private Home/No Home Health	14.3	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	8.6	Bathing	0.0		74.5	25.5	47
Other Nursing Homes	2.9	Dressing	6.4		87.2	6.4	47
Acute Care Hospitals	68.6	Transferring	14.9		74.5	10.6	47
Psych. HospMR/DD Facilities	0.0	Toilet Use	12.8		74.5	12.8	47
Rehabilitation Hospitals	0.0	Eating	68.1		27.7	4.3	47
Other Locations	5.7	*****	*****	*****	*****	******	*****
Total Number of Admissions	35	Continence		용	Special Treatmen	ts	용
Percent Discharges To:	1	Indwelling Or Externa	al Catheter	2.1	Receiving Resp	iratory Care	10.6
Private Home/No Home Health	22.2	Occ/Freq. Incontinent	t of Bladder	63.8	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	22.2	Occ/Freq. Incontinent	t of Bowel	19.1	Receiving Suct	ioning	0.0
Other Nursing Homes	0.0				Receiving Osto	my Care	0.0
Acute Care Hospitals	5.6	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restrained	d	0.0	Receiving Mech	anically Altered Diets	36.2
Rehabilitation Hospitals	0.0				_	-	
Other Locations	2.8	Skin Care			Other Resident C	haracteristics	
Deaths	47.2	With Pressure Sores		0.0	Have Advance D	irectives	95.7
Total Number of Discharges	Ĺ	With Rashes		0.0	Medications		
(Including Deaths)	36 j				Receiving Psyc	hoactive Drugs	63.8

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Own	ership:	Bed	Size:	Lic	ensure:				
	This	Pro	prietary	50	-99	Ski	lled	Al	1		
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities		
	용	%	Ratio	용	Ratio	용	Ratio	용	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	94.0	86.2	1.09	87.1	1.08	88.1	1.07	87.4	1.08		
Current Residents from In-County	63.8	78.5	0.81	81.0	0.79	82.1	0.78	76.7	0.83		
Admissions from In-County, Still Residing	22.9	17.5	1.31	19.8	1.16	20.1	1.14	19.6	1.16		
Admissions/Average Daily Census	74.5	195.4	0.38	158.0	0.47	155.7	0.48	141.3	0.53		
Discharges/Average Daily Census	76.6	193.0	0.40	157.4	0.49	155.1	0.49	142.5	0.54		
Discharges To Private Residence/Average Daily Census	34.0	87.0	0.39	74.2	0.46	68.7	0.50	61.6	0.55		
Residents Receiving Skilled Care	80.9	94.4	0.86	94.6	0.85	94.0	0.86	88.1	0.92		
Residents Aged 65 and Older	97.9	92.3	1.06	94.7	1.03	92.0	1.06	87.8	1.12		
Title 19 (Medicaid) Funded Residents	66.0	60.6	1.09	57.2	1.15	61.7	1.07	65.9	1.00		
Private Pay Funded Residents	31.9	20.9	1.52	28.5	1.12	23.7	1.35	21.0	1.52		
Developmentally Disabled Residents	0.0	0.8	0.00	1.3	0.00	1.1	0.00	6.5	0.00		
Mentally Ill Residents	53.2	28.7	1.85	33.8	1.57	35.8	1.49	33.6	1.58		
General Medical Service Residents	27.7	24.5	1.13	21.6	1.28	23.1	1.20	20.6	1.35		
Impaired ADL (Mean)	46.8	49.1	0.95	48.5	0.96	49.5	0.94	49.4	0.95		
Psychological Problems	63.8	54.2	1.18	57.1	1.12	58.2	1.10	57.4	1.11		
Nursing Care Required (Mean)	5.9	6.8	0.86	6.7	0.87	6.9	0.85	7.3	0.80		